

Hunter v. Durr

06 - CV - 00411

Exhibit F

to Plaintiff's Suggestions in Opposition

to Defendant's Motion for Summary Judgment

Durr's Supervisor's Incident Report

Report Status

Preliminary

Final

General Information		Type(s) of Incident
Incident Date: JANUARY 27, 2005	Time:	Injury <input type="checkbox"/> Fatality <input type="checkbox"/>
Area / Column Location:		Lost time <input checked="" type="checkbox"/>
Employee Name: MS. ANNE MARIE HUNTER		Medical Aid <input type="checkbox"/>
Employee SSN: 509-66-4273 DOB: 11-30-59		First Aid <input type="checkbox"/>
Job Class: Journeyman Appr. A B C - N/A		Near Miss <input type="checkbox"/>
Foreman: - N/A		Type of Damage Cost of Damage
Department: N/A		Fire <input type="checkbox"/>
Witness: CHRISTIAN RATHSACK, DURR APT		Property <input type="checkbox"/>
Where was treatment given: Concentra or (other) BAPTIST HEALTH ER		Equipment <input type="checkbox"/>
Job # and product employee was working on: CLAIMANT PHOTOGRAPHING BC		Business <input type="checkbox"/>
When did employee return to work: CLAIMANT STILL OFF WORK		Security <input type="checkbox"/>
Number of days missed: TARGET RTW 6/1/05		Near Miss <input type="checkbox"/>
		Spills <input type="checkbox"/>

Events leading up to and description of incident (include description of damage & losses)

(What, Where, Why, Who, How)

SEE ATTACHED

Cause Analysis, Direct & Underlying

Unsafe Practices:

WORKING OR ALLOWED TO WORK IN AREA WITH MISSING GRATING

Unsafe Conditions:

EXPOSURE TO A FALL HAZARD AND/OR TRIP HAZARD TO OTHER ELEVATION

Contributing Factors:

FAILURE TO INSPECT AREA OR HAVE AREA INSPECTED TO ASSURE FREE OF FLOOR DODGINGS

Evaluation of Risk

Probable Recurrence:

Frequent:

Occasional:

Rare:

Loss Severity Potential:

Major:

Serious:

Minor:

Supervisor's Incident Investigation Report

Preventive Action

Interim: What interim action has / will be taken to prevent recurrence?

- * ALL VISITORS / VENDORS TO SITE WILL BE ESCORTED AND NOT LEFT UNATTENDED.
- * WHEN ENTERING A HAZARDOUS AREA AREA, EVALUATE AREA FOR HAZARDS CONDUCT A SAFETY TASK ANALYSIS

Final: What final corrective action has / will be taken to prevent recurrence?

- * ALL VISITORS / VENDORS ON SITE TO BE ESCORTED AND ^{NOT} LEFT UNATTENDED
- * SAFETY TASK ANALYSIS TO BE COMPLETED AND REVIEWED WITH ALL PERSONNEL (EMPLOYEES, VISITORS, VENDORS) WITHIN A HAZARDOUS AREA IS TO BE ACCESSED

Responsible party for follow-up: _____ Expected completion date: _____

Follow-up verified by: _____ Actual completion date: _____

Injury Information

Describe the nature of the injury, treatment, medications, follow-up-care, etc.

CONTUSIONS TO RIGHT SIDE OF HER BODY. FURTHER MEDICAL EVALUATION IDENTIFIED FRACTURE TO RIGHT WRIST

Management Control

What management work is possible to prevent losses of this type?

- * PROPER ESCORTING OF PERSONNEL
- * IMMEDIATE CORRECTIVE ACTION OF MATERIAL NOT PROPERLY FITTING

Report Validation & Evaluation

Will a comprehensive report follow? (yes or no)

Investigating Supervisor

Signature

Date

Safety Reviewed

Signature

Date